ADOPTED COPY

Authority Budget of:

Garfield Housing Authority

State Filing Year

2019

For the Period:

April 1, 2019

to

March 31, 2020

www.garfieldhousing.org
Authority Web Address

ADOPTED COPY



Division of Local Government Services

2019 HOUSING AUTHORITY BUDGET

Certification Section

Garfield Howng Authorfy (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM April 1,2019 to March 31,2050

For Division Use Only

CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-11.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

By: Paul D. Curet CPA RMA Date: 3/12/2019

CERTIFICATION OF ADOPTED BUDGET

It is hereby certified that the adopted Budget made a part hereof has been compared with the approved Budget previously certified by the Division, and any amendments made thereto. This adopted Budget is certified with respect to such amendments and comparisons only.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

By: Taul D. Curet CPA RMS Date: 3/19/2019

2019 PREPARER'S CERTIFICATION

GARFIELD HOUSING AUTHORITY (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

4/1/2019

TO:

3/31/2020

It is hereby certified that the Housing Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Housing Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

Preparer's Signature:							
Name:	William Katchen, CPA						
Title:	Fee Accountant						
Address:	596 Anderson Avenue, Suite 303, Cliffside Park, NJ 07010						
Phone Number:	201-943-4449	Fax Number:	201-943-5099				
E-mail address	bill@katchencpa.com						

2019 APPROVAL CERTIFICATION

GARFIELD HOUSING AUTHORITY (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 4/1/2019 TO: 3/31/2020

It is hereby certified that the Housing Authority Budget, including all schedules appended hereto, are a true copy of the Annual Budget and Capital Budget/Program approved by resolution by the governing body of the Garfield Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the __28 __day of January, 2019.

It is further certified that the recorded vote appearing in the resolution represents not less than a majority of the full membership of the governing body thereof.

Officer's Signature:	n						
Name:	Martin Geisler						
Title:	Executive Director						
Address:	70 Daniel P. Conte Court, Garfield, NJ 07026						
Phone Number:	973-340-4170	Fax Number:	973-772-7804				
E-mail address	marty@garfieldhousing.org						

INTERNET WEBSITE CERTIFICATION

Authority's V		www.garfieldhousing.org				
			age on the municipality's or county's Internet			
operations and	d activities. N.J.S.A minimum for public	. 40A:5A-17.1 requires the follow	ide increased public access to the authority's wing items to be included on the Authority's w to certify the Authority's compliance with			
_	-	•				
	•	Authority's mission and responsib				
10	The budgets for the	current fiscal year and immediate	ly preceding two prior years			
4	information (Simila other types of Cha	er information are items such as	port (Unaudited) or similar financial Revenue and Expenditures Pic Charts or n that would be useful to the public in ty)			
./5	The complete (All I immediately two pr	• •	it Synopsis) of the most recent fiscal year and			
Æ	The Authority's rules, regulations and official policy statements deemed relevant by the govern body of the authority to the interests of the residents within the authority's service area or jurisdiction					
Ø	Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting					
P	• •	utes of each meeting of the Author or at least three consecutive fiscal y	ity including all resolutions of the board and years			
1	•	-	nd phone number of every person who some or all of the operations of the			
	corporation or other	•	r person. firm, business, partnership, remuneration of \$17,500 or more during the ered to the Authority.			
webpage as i	identified above con	• • • • • • • • • • • • • • • • • • •	he Authority that the Authority's website or ry requirements of <u>N.J.S.A. 40A:5A-17.1</u> as ce.			
Name of Offi	cer Certifying compl	iiance	Martin Geisler			
Title of Office	er Certifying compli	ance	Executive Director			
Signature						

Page C-4

كل الإحلام 2019 HOUSING AUTHORITY BUDGET RESOLUTION

GARFIELD HOUSING AUTHORITY (Name)

4/1/2019 3/31/2020 FISCAL YEAR: FROM: TO: WHEREAS, the Annual Budget and Capital Budget for the Garfield Housing Authority for the fiscal year beginning, April 1, 2019 and ending, March 31, 2020 has been presented before the governing body of the Garfield Housing Authority at its open public meeting of January 28, 2019; and WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$ 3,567,316, Total Appropriations, including any Accumulated Deficit if any, of \$ 3.513.020 and Total Unrestricted Net Position utilized of and WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$575,000 and Total Unrestricted Net Position planned to be utilized as funding thereof, of \$_____0___; and WHEREAS, the schedule of rents, fees and other charges in effect will produce sufficient revenues, together with all other anticipated revenues to satisfy all obligations to the holders of bonds of the Authority, to meet operating expenses, capital outlays, debt service requirements, and to provide for such reserves, all as may be required by law, regulation or terms of contracts and agreements; and WHEREAS, the Capital Budget/Program, pursuant to N.J.A.C. 5:31-2, does not confer any authorization to raise or expend funds; rather it is a document to be used as part of the said Authority's planning and management objectives. Specific authorization to expend funds for the purposes described in this section of the budget, must be granted elsewhere; by bond resolution, by a project financing agreement, by resolution appropriating funds from the Renewal and Replacement Reserve or other means provided by law. NOW, THEREFORE BE IT RESOLVED, by the governing body of the Garfield Housing Authority, at an open public meeting held on January 28, 2019 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Garfield Housing Authority for the fiscal year beginning, 4/1/2019 and ending, 3/31/2020 is hereby approved; and BE IT FURTHER RESOLVED, that the anticipated revenues as reflected in the Annual Budget are of sufficient amount to meet all proposed expenditures/expenses and all covenants, terms and provisions as stipulated in the said Housing Authority's outstanding debt obligations, capital lease arrangements, service contracts, and other pledged agreements; and BE IT FURTHER RESOLVED, that the governing body of the Garfield Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on March 18, 2019. (Secretary's Signature) **Governing Body** Recorded Vote Member: Abstain Absent Aye Nay Dabal notion mr Giacognamsk Ribaudo *Susino* Page C-5

2019 ADOPTION CERTIFICATION

GARFIELD HOUSING AUTHORITY (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:4/1/2019

TO:3/31/2020

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the Garfield Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the _18__ day of, March, 2019.

Officer's Signature:						
Name:	Martin Geisler					
Title:	Executive Director					
Address:	70 Daniel P. Conte Court, Garfield, NJ 07026					
Phone Number:	973-340-4170	Fax Number:	973-772-7804			
E-mail address	Marty @garfieldho	using.org				

2019-03 2019 ADOPTED BUDGET RESOLUTION

GARFIELD (Name) HOUSING AUTHORITY

FISCAL YEAR:

FROM:4/1/2019

TO:3/31/2020

WHEREAS, the Annual Budget and Capital Budget/Program for the Garfield Housing Authority for the fiscal year beginning April 1, 2019 and ending, March 31, 2020 has been presented for adoption before the governing body of the Garfield Housing Authority at its open public meeting of March 18, 2019; and

WHEREAS, the Annual Budget and Capital Budget as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$575,000 and Total Unrestricted Net Position planned to be utilized of \$____0____; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of Garfield Housing Authority, at an open public meeting held on March 18, 2019 that the Annual Budget and Capital Budget/Program of the Garfield Housing Authority for the fiscal year beginning, April 1, 2019 and, ending, March 31, 2020 is hereby adopted and shall constitute appropriations for the purposes stated; and

BE IT FURTHER RESOLVED, that the Annual Budget and Capital Budget/Program as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services.

(Secretary's Signature)

(Date)

10.19

Governing Body Member:

Garfield Housing Authority Board of Commissioners

Page C-7

2019 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2019 HOUSING AUTHORITY BUDGET MESSAGE &

Garfield Housing Authority
(Name)

AUTHORITY BUDGET

FISCAL YEAR: FROM: April 1,2019 to: March 31,2020

Answer all questions below. Attach additional pages and schedules as needed.

- 1. Complete a brief statement on the 2019/2019-2020 proposed Annual Budget and make comparison to the 2018/2018-2019 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). See Attached.
- 2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget. The proposed budget has little impact on the majority of revenue as tenant charges are based on formula.
- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. The local economy is stable and not expected to impact the proposed budget.
- 4. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered. It is not expected that unrestricted net position will be utilized.
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). None, except for annual PILOT.
- 6. The proposed budget must not reflect an anticipated deficit from 2019/2019-2020 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question. (Prepare a response to deficits caused by the implementation of GASB 68, 45) The Authority's accumulated deficit is expected to be reduced in the proposed year based on the budgeted excess of revenue over. Expenses.

GARFIELD HOUSING AUTHORITY

2019 NEW JERSEY BUDGET

PAGE N-1, QUESTION 1

Revenue:

- 1.) HUD operating subsidy is anticipated to be higher based on formula.
- 2.) Late charges and prorations are budgeted lower expecting less funding for the congregate housing program.

Appropriations:

1.) Administrative salaries are budgeted lower to provide for retirement of staff.

HOUSING AUTHORITY CONTACT INFORMATION 2019

Please complete the following information regarding this Housing Authority. <u>All</u> information requested below must be completed.

Name of Authority:	Garfield Housing Authori	ıy					
Federal ID Number:	22-6002883						
Address:	70 Daniel P. Conte Court						
City, State, Zip:	Garfield		NJ	07026			
Phone: (ext.)	973-340-4170	Fax:	973-7	72-7804			
Preparer's Name:	William Katchen, CPA			-			
Preparer's Address:	596 Anderson Avenue, Su	lite 303					
City, State, Zip:	Cliffside Park		NJ	07010			
Phone: (ext.)	201-943-4449	Fax:	201-9	43-5099			
E-mail:	bill@katchencpa.com						
Chief Executive Officer:	Martin Geisler						
Phone: (ext.)	973-340-4170	Fax:	973-7	72-7804			
E-mail:	marty@garfieldhousing.o	rg					
Chief Financial Officer:	Martin Geisler						
Phone: (ext.)	973-340-4170 F	ax: 97	73-772-78	04			
E-mail:	marty@garfieldhousing.o	rg					
Name of Auditor:	Michael Maurice, CPA						
Name of Firm:	Polcari and Company	····					
Address:	2035 Hamburg Tumpike,	Unit H					
City, State, Zip:	Wayne		NJ	07470			
Phone: (ext.)	973-831-6969	Fax:	973-83	31-6972			
E-mail:	polcari@optonline.net	•					

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

GARFIELD HOUSING AUTHORITY (Name)

FISCAL YEAR: FROM: 4/1/2019 TO: 3/31/2020 Answer all questions below completely and attach additional information as required. 1) Provide the number of individuals employed in (Use Most Recent W-3 Available 2017 or 2018) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 45 2) Provide the amount of total salaries and wages as reported on the Authority's Form W-3. (Use Most Recent W-3 Available 2017 or 2018)Transmittal of Wage Statements: \$1,211,167 3) Provide the number of regular voting members of the governing body: ___7 4) Provide the number of alternate voting members of the governing body: 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? No_____ If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority. 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year (Most Recent Filing that March 31, 2018 or 2019 deadline has passed 2018 or 2019) because of their relationship with the Authority file the form as required? (Checked to see if individuals actually filed at http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html before answering) If "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? No If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority. 8) Was the Authority a party to a business transaction with one of the following parties: a. A current or former commissioner, officer, key employee, or highest compensated employee? No b. A family member of a current or former commissioner, officer, key employee, or highest compensated employee? No c. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? If the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process. 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferor. If "yes," attach a description No of the arrangement, the premiums paid, and indicate the beneficiary of the contract.

	Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. Attach a narrative of your Authorities procedures for all employees. Board review.
11)	Did the Authority pay for meals or catering during the current fiscal year?No If "yes," attach a detailed list of all meals and/or catering invoices for the current fiscal year and provide an explanation for each expenditure listed.
-	Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? No if "yes," <u>attach a detailed list of all travel expenses</u> for the current fiscal year and provide an explanation for each expenditure listed.
	Did the Authority provide any of the following to or for a person listed on Page N-4 or any other employee of the Authority:
	a. First class or charter travel No
	b. Travel for companions No
	c. Tax indemnification and gross-up paymentsNo d. Discretionary spending accountNo
	e. Housing allowance or residence for personal useNo
	f. Payments for business use of personal residence No
	g. Vehicle/auto allowance or vehicle for personal use No
	h. Health or social club dues or initiation feesNo
	i. Personal services (i.e.: maid, chauffeur, chef)No
	If the answer to any of the above is "yes," attach a description of the transaction including the name
	and position of the individual and the amount expended.
14)	Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred
	by employees and/or commissioners during the course of Authority business and does that policy
	require substantiation of expenses through receipts or invoices prior to reimbursement? Yes
	If "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses. (If your authority does not allow for reimbursements indicate that in
	answer)
	Did the Authority make any payments to current or former commissioners or employees for
,	severance or termination? No If "yes," attach explanation including amount paid.
i6)	Did the Authority make any payments to current or former commissioners or employees that were
-	contingent upon the performance of the Authority or that were considered discretionary bonuses?
	NoIf "yes," attach explanation including amount paid.
17)	Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances
	outstanding by submitting its audited annual financial statements, annual operating data, and notice of
	material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace
	Access (EMMA) as required?N\A If "no," attach a description of the Authority's plan to
	ensure compliance with its Continuing Disclosure Agreements in the future.
18)	Did the Authority receive any notices from the Department of Housing and Urban Development or
	any other entity regarding maintenance or repairs required to the Authority's facilities to bring them into compliance with current regulations and standards that it has not yet taken action to remediate?
	No If "yes," attach explanation as to why the Authority has not yet undertaken the
	required maintenance or repairs and describe the Authority's plan to address the conditions identified.
19)	Did the Authority receive any notices of fines or assessments from the Department of Housing and
•	Urban Development or any other entity due to noncompliance with current regulations?
	No If "yes," attach a description of the event or condition that resulted in the fine or
	assessment and indicate the amount of the fine or assessment.
20)	Has the Authority been deemed "troubled" by the Department of Housing and Urban Development?
	No If "yes," attach an explanation of the reason the Authority was deemed "troubled" and
	DECEMBER OF A HISTORIAL CRIST IN SOUTHER THE CONTINUE MANIELLA

AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS GARFIELD HOUSING AUTHORITY

(Name)

FISCAL YEAR: FROM: 4/1/2019 TO: 3/31/2020

Complete the attached table for all persons required to be listed per #1-4 below.

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's <u>former</u> officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- Commissioner: A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
 - a) The individual received reportable compensation from the authority and all other public entities in excess of \$150,000 for the most recent fiscal year completed; and
 - b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.
- Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.
- Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.
- Reportable compensation: The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2019 Most recent available W-2 and 1099 should be used (2017 or 2018 Forms)(60 days prior to start of budget year is November 1, 2018, with 2017 being the most recent calendar year ended), and for fiscal years ending June 30, 2019, the calendar year 2018 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2018 being the most recent calendar year ended).
- Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

Authority Schedule of Commissioners, Officers, Key Employees, Highest Compensated Employees and Independent Contractors (Continued)

							Garfi	eld Ho	susing Autho	stly									•
		For the Period	April 1, 2019			to			March 3	1, 2020									
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			Average Hours	١٤		Š	ខ				account,	from the		Employee or	Positions held at		Compensation	(health benefits,	1
			per Week	15		5	2 4		Base		payment in	Authority	Total	Member of the	Other Public	Other Public	from Other	pension, payment in	Total
			Dedicated to	Į į	B	ğ	を言	द्	Salary/			(health benefits,		Governing Body	1) Entities Listed in	Entities Usted		hau of health	Compensation
	Name	Title	Position	Įğ	5	覆	4 5	25	Stipend	Bonus	benefits, etc.)	pension, etc.)	from Authority		Column O	in Column O	(W-2/ 1099)	benefits, etc.)	All Public Entities
11	Voel Quilles	Chairperson		X									\$	- None					\$ -
2 8	dward Pusio	Vice Chairperson		x										O NIPERS	retred		900,000	•	
3 6	ledeQ btswb	Commissioner		×										O None			-		0
41	Marie Barckett	Commissioner		x										O None					0
	lichard Giacomarro	Commissioner		X										O NIPERS	retired		4	,	
	udith Susso	Commissioner		X										D None					O
	Rosemarie Ribaudo	Commissioner		x										D NIPERS	retired			•	
8 8	Martin Geisler	Executive Oirector				X			-	R		(())		10 Lodi	Judge	•			de citado
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(1) Insert "None" in this column for each individual that does not hold a pastition with another Public Entity

general genera THE ST.

Schedule of Health Benefits - Detailed Cost Analysis

Garfield Housing Authority

F	or	ti	16	Pe	rio

April 1, 2019

to

March 31, 2020

	# of Covered Members (Medical & Rx) Proposed Budget	Annual Cost Estimate per Employee Proposed Budget	Total Cost Estimate Proposed Budget	# of Covered Members (Medical & Rx) Current Year	Annual Cost per Employee Current Year	Total Prior Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
Active Employees - Health Benefits - Annual Cost								P. 1988
Single Coverage	5	\$ 12,086	\$ 60,430	5	\$ 11,861	\$ 59,305	\$ 1,125	1.9%
Parent & Child	1	24,172	24,172	1	21,232	21,232	2,940	13.8%
Employee & Spouse (or Partner)	2	21,634	43,268	2	23,722	47,444	(4,176)	-8.8%
Family	. 5	33,720	168,600	6	33,093	198,558	(29,958)	-15.1%
Employee Cost Sharing Contribution (enter as negative -)			(12,128)			(13,119)	991	-7.6%
Subtotal	13		284,342	14		313,420	(29,078)	-9.3%
		Part Part					10000000000000000000000000000000000000	
Commissioners - Health Benefits - Annual Cost	大学的大学							
Single Coverage		-	-			-	-	#DIV/0!
Parent & Child						-		#DIV/0!
Employee & Spouse (or Partner)						-		#DIV/0!
Family								#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							-	HDIV/01
Subtotal	0			0		-		#DIV/01
				and the state of		Button in the State of the Stat		
Retirees - Health Benefits - Annual Cost					British Alberta			
Single Coverage	3	4,561	13,683	3	6,304	18,912	(5,229)	-27.6%
Parent & Child	1	13,700	13,700	1	21,818	21,818	(8,118)	-37.2%
Employee & Spouse (or Partner)	4	7,992	31,968	5	15,362	76,810	(44,842)	-58.4%
Family			-	A				#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							-	#DIV/0!
Subtotal	8		59,351	9		117,540	(58,189)	-49.5%
				· 加里尔 。	and the same			
GRAND TOTAL	21		\$ 343,693	23		\$ 430,960	\$ (87,267)	-20.2%
Is medical coverage provided by the SHBP (Yes or No)? (Place is prescription drug coverage provided by the SHBP (Yes or No)?		×)		Yes or No Yes ar No				

Note: Remember to Enter an amount in rows for Employee Cost Sharing

Schedule of Accumulated Liability for Compensated Absences

Garfield Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

Complete the below table for the Authority's acc	rued liability for compensated ab	sences.	Legal Ba (check ap			-
Individuals Eligible for Benefit	Gross Days of Accumulated Compensated Absences at beginning of Current Year	Dollar Value of Accrued Compensated Absence Liability	Approved Labor Agreement	Resolution	Individual	Employment Agreement
See Attached		\$ 90,055		Х		
-						
Total liability for accumulated compensated abs	ences at beginning of current year	\$ 90,055	•			

The total Amount Should agree to most recently issued audit report for the Authority

Schedule of Shared Service Agreements

Garfield Housing Authority

For the Period	
----------------	--

April 1, 2019

to

March 31, 2020

Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/pald for those services.

| Agreement | Agreement | Effective | Agreement | Effective | Agreement | End Date | End

If No Sh	ared Ser	vices X	this	Box
----------	----------	---------	------	-----

2019 HOUSING AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

Garfield Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

						FY 2018 Adopted	S Increase (Decrease) Proposed vs.	% Increase (Decrease) Proposed vs.
		FY 2	2019 Propose	d Budget		Budget	Adopted	Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	Ali Operations	All Operations
REVENUES								
Total Operating Revenues	\$ 3,476,326	\$	- \$	- \$ 81,090	\$ 3,557,416	\$ 3,456,765	\$ 100,651	2.9%
Total Non-Operating Revenues	9,900		-		9,900	9,900		0.0%
Total Anticipated Revenues	3,486,226		<u> </u>	- 81,090	3,567,316	3,466,665	100,651	2.9%
APPROPRIATIONS								
Total Administration	846,150		. .	- 50,000	896,150	1,041,880	(145,730)	-14.0%
Total Cost of Providing Services	2,585,780		•	31,090	2,616,870	2,559,580	57,290	2.2%
Total Principal Payments on Debt Service in Liau of Depreciation	xxxxxxxxxx	xxxxxxxxx	хххххххххх	XXXXXXXXXX	<u>. </u>		<u>.</u>	#DIV/0!
Total Operating Appropriations	3,431,930		•	81,090	3,513,020	3,601,460	(88,440)	-2.5%
Total interest Payments on Debt Total Other Non-Operating Appropriations	XXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	xxxxxxxxxx	•	•		#DIV/0! #DIV/01
Total Non-Operating Appropriations	•		•		•		•	#DIV/O!
Accumulated Deficit	-		•	<u> </u>	<u> </u>	·		#DIV/0!
Total Appropriations and Accumulated Deficit	3,431,930			- 81,090	3,513,020	3,601,460	(88,440)	-2.5%
Less: Total Unrestricted Net Position Utilized	•		•		•	134,795	(134,795)	-100.0%
Net Total Appropriations	3,431,930			81,090	3,513,020	3,466,665	46,355	1.3%
ANTICIPATED SURPLUS (DEFICIT)	\$ 54,296	\$	<u> </u>	· \$ -	\$ 54,296	\$ -	\$ 54,296	#DIV/0!

Revenue Schedule

For the Perlad

Garfield Housing Authority

April 1, 2019

to March 31, 2020

% increase

\$ Increase

						SV 901	0.444	(Dec	rease)	(Decrease)
		FY 2019	Proposed	Budaet			B Adopted Idget	-	osed vs. opted	Proposed vs. Adopted
•			,							
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations		tal All rations	All Op	erations	All Operations
OPERATING REVENUES										
Rental Fees					١.					
Homebuyers' Monthly Payments					s ·	\$	•	\$	•	#DIV/01
Dwelling Rental	2427930				2,427,930		2,401,770		26,160	1.1%
Excess Utilities	50100				50,100		50,100		•	0.0%
Non-Dwelling Rental							-		•	#DIV/01
HUD Operating Subsidy	868296				868,296		760,165		108,131	14.2%
New Construction - Acc Section 8					٠ .		•		•	#DIV/OI
Voucher - Acc Housing Voucher	L				<u> </u>				·	10/VIGR
Total Rental Fees	3,346,326				3,346,326		3,212,035		134,291	4.2%
Other Operating Revenues (List)										
Late charges and prorations	130000			81090	211,090		244,730		(33,640)	-13.7%
Type in (Grant, Other Rev)					•		•		•	#DIV/0!
Type in (Grant, Other Rev)							•		•	#DIV/0!
Type in (Grant, Other Rev)					•		•		•	#DIV/01
Type in (Grant, Other Rev)							•		•	#DIV/0!
Type in (Grant, Other Rev)							•		•	#DIV/0!
Type in (Grant, Other Rev)							•		•	#DIV/01
Type in (Grant, Other Rev)							•		•	#DIV/OI
Type in (Grant, Other Rev)							•		•	#DIV/01
Type in (Grant, Other Rev)					٠ .		•		•	#DIV/01
Type in (Grant, Other Rev)							•		•	#DIV/01
Type In (Grant, Other Rev)							•		•	#DIV/0I
Type in (Grant, Other Rev)	Ì						•		•	#DIV/OI
Type in (Grant, Other Rev)							•		•	#D!V/01
Type In (Grant, Other Rev)					-		•		•	#DIV/01
Type in (Grant, Other Rev)							-		•	#DIV/01
Type in (Grant, Other Rev)							•		•	#DIV/01
Type in (Grant, Other Rev)							•		•	#DIV/01
Type in (Grant, Other Rev)					1 -		•		•	#DIV/01
Type in (Grant, Other Rev)		•			<u> </u>		•			#DIV/OI
Total Other Revenue	130,000	•		81,090	211,090		244,730		(33,640)	-13.7%
Total Operating Revenues	3,476,326			81,090	3,557,416		3,456,765		100,651	2.9%
NON-OPERATING REVENUES										
Other Non-Operating Revenues (List)					_					
TypeIn							•		-	#DIV/GI
Type In			•				•		•	#DIV/GI
Type In							•		•	#DIV/GI
Type in	į						•		•	#DIV/01
Type in									•	#DIV/OI
Type in	}						•		•	#DIV/QI
Total Other Non-Operating Revenue			•		•		-			#DIV/01
Interest on Investments & Deposits (List)										•
Interest Earned	9,900				9,900		9,900		-	0.0%
Penaltles	1						•		•	#DIV/01
Other					<u> </u>					#DIV/01
Total Interest	9,900				9,900		9,900		-	0.0%
Total Non-Operating Revenues	9,900	•	·		9,900		9,900		-	0.0%
TOTAL ANTICIPATED REVENUES	\$ 3,486,226	<u>s</u> .	<u> </u>	\$ 81.050	\$ 3,567,316	5	3,466,665	<u>s</u>	100,651	2.9%

Prior Year Adopted Revenue Schedule

Garfield Housing Authority

		FY 20.	18 Adopted Bu	ıdget	
	Public Housing		Housing		Total Ali
	Management	Section 8	Voucher	Other Programs	Operations
OPERATING REVENUES					
Rental Fees					•
Homebuyers' Monthly Payments					\$ -
Dwelling Rental	2,401,770				2,401,770
Excess Utilities	50,100				50,100
Non-Dwelling Rental					
HUD Operating Subsidy	760,165				760,165
New Construction - Acc Section 8					•
Voucher - Acc Housing Voucher					•
Total Rental Fees	3,212,035	-		•	3,212,035
Other Revenue (List)		_			_
Late charges and prorations	130000			114,730	244,730
Type in (Grant, Other Rev)	1				
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					l -
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					١.
Total Other Revenue	130,000	•		- 114,730	244,730
Total Operating Revenues	3,342,035	•		- 114,730	3,456,765
NON-OPERATING REVENUES					
Other Non-Operating Revenues (List)					
Type in	f				1.
Type in	1				l.
Type in					Ι.
Туре іп					
Type in	•				1.
Type in					Ι.
Other Non-Operating Revenues	<u> </u>	•			•
Interest on Investments & Deposits					
Interest Earned	9,900	-		· · · · · · · · · · · · · · · · · · ·	9,900
Penalties]]
Other	1				
Total Interest	9,900				9,900
Total Mon-Operating Revenues	9,900				9,900
TOTAL ANTICIPATED REVENUES	\$ 3,351,935	\$.	\$	- \$ 114,730	\$ 3,466,665

Appropriations Schedule

For the Period

Garfield Housing Authority

April 1, 2019

March 31, 2020

						FY 2018 Adopted	\$ Increase (Decrease) Proposed vs.	% Increase (Decrease) Proposed vs.
		FY	2019 Propos	ed Budget		Budget	Adopted	Adopted
	Public Housing Management	Section B	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations
OPERATING APPROPRIATIONS								
Administration				35,000	s 413,590	s 535,370	S (121,780)	-22.7%
Salary & Wages	378,590				288,560	313,610	{25,050}	-8.09
Fringe Benefits	273,560			15,000	268,560 30,600	30,600	(23,030)	0.09
Legal	30,600				15,000	15,000		0.07
Staff Training	15,000 12,000				12,600	12,000		0.09
Travel	36,000				36,000	35,400	600	1.79
Accounting Fees	9,000			1	9,000	8,500	500	5.97
Auditing Fees	91,400				91,400	91,400	•	0.09
Miscellaneous Administration* Total Administration	846,150		-	50,000	896,150	1,041,880	(145,730)	-14.09
Cost of Providing Services	0.0,230							
Salary & Wages • Tenant Services	27,800		·	31,090	58,890	58,730	160	0.39
Salary & Wages - Maintenance & Operation	634,060			,	634,060	594,210	39,850	6.79
Salary & Wages - Protective Services	02-,000					•		#DIV/01
Salary & Wages - Utility Labor	51,670			ì	53,670	48,250	3,420	7.19
Fringe Benefits	410,360				410,360	432,920	(22,560)	-5 27
Tenant Services	11,400			1	11,400	11,400	•	0.09
Utilities	\$70,950				570,950	\$43,010	27,940	5.19
Maintenance & Operation	\$20,000				520,000	516,000	4,000	0.83
Protective Services	1				•	•	•	#DIV/01
Insurance	145,000				145,000	140,000	5,000	3.69
Payment in Lieu of Taxes (PILOT)	185,540			ł	185,540	186,060	(520)	-0.39
Terminal Leave Payments					•	•	•	#DN/01
Collection Losses	10,000			ł	10,000	10,000	•	0.01
Other General Expense	ľ			1	•	•	•	#DIV/0!
Rents				ł l	•	•	•	#DIV/OI
Extraordinary Maintenance					•	-	•	#DIV/CI
Replacement of Non-Expendible Equipment	19,000			*	19,000	19,000	•	0.05
Property Betterment/Additions					•	-	•	#DIV/OI
Miscellaneous COPS*								#DIV/01
Total Cost of Providing Services	2,585,780	•	<u> </u>	31,090	2,616,870	2,559,580	57,290	2.25
Total Principal Payments on Debt Service in Lieu of								
Depreciation	XXXXXXXXXXX	XXXXXXXXXXX		XXXXXXXXXX	<u> </u>		-	#DIV/01
Total Operating Appropriations	3,431,930			81,090	3,513,020	3,601,460	(88,440)	-2 5
NON-OPERATING APPROPRIATIONS								
Total Interest Payments on Debt	XXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXX	•	•	•	#DIV/01
Operations & Maintenance Reserve					•	•	•	#DIV/01
Renewal & Replacement Reserve	}				•	•	•	#DIV/01 #DIV/01
Municipality/County Appropriation					•	•	•	#DIV/01
Other Reserves	L				-	<u>-</u>		#DIV/01
Total Non-Operating Appropriations		<u> </u>	<u> </u>		3,513,020	3,601,460	100 440)	•
TOTAL APPROPRIATIONS	3,431,930			81,090	3,313,050	3,001,480	(88,440)	#BIV/01
ACCUMULATED DEFICIT	L							. *********
TOTAL APPROPRIATIONS & ACCUMULATED						3 (3) (6)	100 445	•2.5°
DEFICIT	3,431,930	-		81,090	3,513,020	3,601,460	(88,440)	2.3
UNRESTRICTED NET POSITION UTILIZED						_	_	#DIV/01
Municipality/County Appropriation		<u> </u>			•	134,795	(134,795)	
Other	L					134,795	(134,795)	
Total Unrestricted Net Position Utilized	\$ 3,431,930		5	\$ 81,090	\$ 3,513,020	5 3,466,665	\$ 46,355	1.3
TOTAL NET APPROPRIATIONS	2 3,421,43U			- 01,070	3,343,640	5,700,003		

^{*} Miscellaneous line items may not exceed 5% of total operating appropriations shown below if amount in miscel aneous is greater than the amount shown below, then the line item must be itemized above

5% of Total Operating Appropriations

\$ 171,596.50 \$

. 5 - 5

4,054.50 \$

Prior Year Adopted Appropriations Schedule

Garfield Housing Authority

	Public Housing				Total Ali
	Management	Section 8	Housing Voucher	Other Programs	Operations
PPERATING APPROPRIATIONS					
dministration				····	
Salary & Wages	\$ 480,370				\$ 535,370
Fringe Benefits	288,610			25,000	313,610
Legal	30,600				30,600
Staff Training	15,080				15,000
Travel	12,000				12,000
Accounting Fees	35,400				35,400
Auditing Fees	8,500				8,500
Miscellaneous Administration*	91,400				91,400
Total Administration	961,880	•	•	80,000	1,041,880
ost of Providing Services					
Salary & Wages - Tenant Services	24,000			34,730	58,730
Salary & Wages - Maintenance & Operation	594,210			· .	594,210
Salary & Wages - Protective Services				1	
Salary & Wages - Utility Labor	48,250				48,250
Fringe Benefits	432,920				432,920
Tenant Services	11,400				11.400
Utilities	543,010			ł	543,010
Maintenance & Operation	516,000			Ì	516,000
Protective Services	320,000				520,000
Insurance	140,000				140,000
Payment In Lieu of Taxes (PILOT)	186,050				186,060
Terminal Leave Payments	100,000			j	100,000
Collection Losses	10,000				10,600
Other General Expense	10,000			i	10,000
Rents					
Extraordinary Maintenance Register most of New Expandible Equipment	19,000				19,000
Replacement of Non-Expendible Equipment	19,000	,			19,000
Property Betterment/Additions					,
Miscellaneous COP5*	2 524 850			34,730	2 550 500
Total Cost of Providing Services otal Principal Payments on Debt Service in Lieu of	2,524,850	·		34,730	2,559,580
· · ·	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
Depreciation		λλλλλλλλλλλλλλ	***********		3,601,460
Total Operating Appropriations	3,486,730	·		114,730	3,001,460
ION-OPERATING APPROPRIATIONS		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	WWWWWWWW	VVVVVVVVVVVVVVV	
otal Interest Payments on Debt	XXXXXXXXXXXX	XXXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXXXXXX	•
perations & Maintenance Reserve					•
lenewal & Replacement Reserve	ļ				•
Aunicipality/County Appropriation					
Other Reserves	<u> </u>		····		
Total Non-Operating Appropriations		<u> </u>	·		
OTAL APPROPRIATIONS	3,486,730	-		114,730	3,601,460
ACCUMULATED DEFICIT					<u> </u>
OTAL APPROPRIATIONS & ACCUMULATED					
EFICIT	3,486,730	<u> </u>		114,730	3,601,460
INRESTRICTED NET POSITION UTILIZED					
Aunicipality/County Appropriation		•		<u> </u>	
Other	134,795				134,799
Total Unrestricted Net Position Utilized	134,795		•	•	134,799
OTAL NET APPROPRIATIONS	\$ 3,351,935	\$ -	\$ -	\$ 114,730	\$ 3,466,665

180,073.00

5% of Total Operating Appropriations \$ 174,336.50 \$

Debt Service Schedule - Principal

Garfield Housing Authority

If Authority has no debt X this box	Х			_					
	Adopted Budget Year 2018	Proposed Budget Year 2019	2020	2021	2022	2023	2024	Thereafter	Total Principal Outstanding
Type in Issue Name									\$.
Type in Issue Name									•
Type in Issue Name									•
Type in Issue Name TOTAL PRINCIPAL	-	•		•	•	•	•		
LESS: HUD SUBSIDY NET PRINCIPAL	\$.	\$ -	\$	· \$	\$ -	\$ ·	\$	S	· \$ ·

·	Moody's	Fitch	tings service. Standard & Poors
Bond Rating			
ear of Last Rating			-
	if no P:	ting type in Not	Annlicable

Debt Service Schedule - Interest

Garfield Housing Authority

If Authority has no debt X this box	х			Fiscal Year En	ding in				
	Adopted Budget Year 2018	Proposed Budget Year 2019	2020	2021	2022	2023	2024	- Thereafter	Total Interest Payments Outstanding
Type in Issue Name									-
Type in Issue Name									•
Type in Issue Name									•
Type in Issue Name					•				
TOTAL INTEREST LESS: HUD SUBSIDY	•	•		•	•	-	-	•	•
NET INTEREST	\$ -	\$ -	\$	- \$ -	\$.	\$ - :		\$ -	\$.

Net Position Reconciliation

Garfield Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

FY 2019 Proposed Budget

		blic Housing			Housing			Total Ali
	M	anagement	Section	ก 8	Voucher	Other	Programs	Operations
TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)	\$	6,809,934	\$	•	\$ -	\$	11,082	\$ 6,821,016
Less: Invested in Capital Assets, Net of Related Debt (1)		9,261,636						9,261,636
Less: Restricted for Debt Service Reserve (1)	1							-
Less: Other Restricted Net Position (1)	1							-
Total Unrestricted Net Position (1)		(2,451,702)		•	-		11,082	(2,440,620)
Less: Designated for Non-Operating Improvements & Repairs								-
Less: Designated for Rate Stabilization	ļ							-
Less: Other Designated by Resolution	1							-
Plus: Accrued Unfunded Pension Liability (1)	-	2,674,240						2,674,240
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)	1	1,023,128						1,023,128
Plus: Estimated Income (Loss) on Current Year Operations (2)		(134,795)					:	(134,795)
Plus: Other Adjustments (attach schedule)								
UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET		1,110,871					11,082	1,121,953
Unrestricted Net Position Utilized to Balance Proposed Budget		•	·	_			-	-
Unrestricted Net Position Utilized in Proposed Capital Budget		•		_	-		•	•
Appropriation to Municipality/County (3)		•		-	•		•	-
Total Unrestricted Net Position Utilized in Proposed Budget		-		-			-	-
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR								
(4)	\$	1,110,871	\$	<u> </u>	\$ -	\$	11,082	\$ 1,121,953
(1) Total of all operations for this line item must agree to audited financial state	ment	c						
(2) Include budgeted and unbudgeted use of unrestricted net position in the cur			one					
(3) Amount may not exceed 5% of total operating appropriations. See calculation		•	una.					
Maximum Allowable Appropriation to Municipality/County	Sen	171,597	4		ć -	Ś	4,055	\$ 175,651
	~	212,001	~	_	Y	¥	7,023	+ LUU,UL

(4) If Authority is projecting a deficit for any operation at the end of the budget period, the Authority must attach a statement explaining its plan to reduce the

deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section.

2019 Garfield Housing Authority

(Name)

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

GARFIELD HOUSING AUTHORITY (Name)

	FISCAL	I BAK:	FROM:	4/1/2019	10:	3/31/2020	
is a Ann	It is hereby ce true copy of the Capital ual Budget, by the govern ary, 2019.	Budget/I	rogram appro	oved, pursuant to h	I.J.A.C. 5	5:31-2.2, along	with the
				OR			
elec	It is hereby cented NOT to adopt a Cap-2.2 for the follo	ital Bud	get /Program				
	Officer's Signature:	1	2				
	Name:	Martir	Geisler				
	Title:	Execu	tive Director				
	Address:	70 Da	niel P. Conte (Court, Garfield, NJ	07026		
	Phone Number:	973-34	10-4170	Fax Number:	973-7	772-7804	
	E-mail address	marty(@garfieldhous	sing.org			

2019 CAPITAL BUDGET/PROGRAM MESSAGE

Garfield Housing Authority (Name)

FISCAL YEAR:

FROM:

4/1/2019

TO:

3/31/2020

This section is included in the Capital Budget pursuant to N.J.A.C. 5:31-2. It does not in itself confer any authorization to raise or expend funds. Rather, it is a document used as part of the Housing Authority's planning and management system. Specific authorization to spend funds for purposes described in this section must be granted elsewhere, by a separate financing agreement, security agreement, by resolution appropriating funds from the Renewal and Replacement Reserve, or other lawful means.

- 1. Has the Capital Budget/Program been prepared in consultation with or reviewed by, the local and county planning board(s), governing body(ies), or other affected governmental entity(ies) of the jurisdiction(s) served by the Housing Authority?

 Yes.
- 2. Has each capital project/project financing been developed from a specific plan or report and have the full life cycle costs of each been calculated?
 No.
- 3. Has the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?
- 4. Are any of the capital projects/project financings being undertaken in a community that has a State Plan designated center? If so, please describe the relationship of same to the center's goals and objectives.

 No.
- Describe the impact on the schedule of rents and/or user charges if the proposed capital projects are undertaken. Indicate the impact on current and future year's schedules.
 No impact, tenant charges are based on HUD formula.
- 6. Have the projects been reviewed and approved by HUD? Yes.

Add additional sheets if necessary.

Proposed Capital Budget

Garfield Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

				Fu	nding Sources		
		_		Renewal &			
	Estimated Tota	al	Unrestricted Net	Replacement	Debt		Other
	Cost		Position Utilized	Reserve	Authorization	Capital Grants	Sources
Public Housing Management	_						
Operations	\$ 50,00	0				\$ 50,000	
Administration	81,00	0				81,000	
A\E Fees	27,00	0				27,000	
Various Improvements	417,00	0				417,000	
Total	575,00	0 -	•	-	•	575,000	•
Section 8							
Type in Description		- [· · · · · · · · · · · · · · · · · · ·		
Type in Description		.					
Type in Description		- 1					
Type in Description							
Total		- '	•	•	•		•
Housing Voucher							
Type in Description	7	. [
Type in Description		-					
Type in Description							
Type in Description		.					
Total			-	•	-	•	-
Other Programs							
Type in Description	1	. [
Type in Description	1	.					
Type in Description	1	.					j
Type in Description		<u>.</u>					l
Total			•	•	•	•	
TOTAL PROPOSED CAPITAL BUDGET	\$ 575,00		\$ -	\$ -	\$ -	\$ 575,000	5

Enter brief description of up to four projects for each operation above. For operations with more than four budgeted projects, please attach additional schedules. Input total amount of all projects for the operation on single line and enter "See Attached Schedule" instead of project description.

5 Year Capital Improvement Plan

Garfield Housing Authority

For the Period

April 1, 2019

to

March 31, 2020

	Fiscal Year Beginning In													
· .	Estimated Total Cost		Current Budget Year 2019		2020 202		2021	2021			2023		2024	
Public Housing Management														
Operations	\$	300,000	\$	50,000	\$ 50,000	\$	50,800	\$	50,000	\$	50,000	\$	50,000	
Administration		486,000		81,000	81,000		81,000		81,000		81,000		81,000	
A\E Fees		162,000		27,000	27,000		27,000		27,000		27,000		27,000	
Various Improvements		2,502,000		417,000	417,000		417,000		417,000		417,000		417,000	
Total		3,450,000		575,000	575,000		575,000		575,000		575,000		575,000	
Section 8														
Type in Description		-		-										
Type in Description		•		-									ĺ	
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Total				-					•		•		•	
Housing Voucher														
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Type in Description		•		-									1	
Type in Description		•		-										
Total	_	•		-	•		•		•		•		•	
Other Programs														
Type in Description		-		•										
Type in Description		•		-									ľ	
Type in Description		-		-										
Type in Description				_•									1	
Total		•							-					
TOTAL	\$	3,450,000	\$	575,000	\$ 575,000	\$	575,000	\$	575,000	\$	575,000	\$	575,000	

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

5 Year Capital Improvement Plan Funding Sources

March 31, 2020

For the Period April 1, 2019

			•									
			Funding Sources									
				Renewal &								
	Esti	mated Total	Unrestricted Ne	et Replacement	Debt							
		Cost	Position Utilize	d Reserve	Authorization	Capital Grants	Other Sources					
Public Housing Management												
Operations	\$	300,000				\$ 300,000						
Administration		486,000				486,000						
A\E Fees		162,000				162,000						
Various Improvements		2,502,000				2,502,000						
Total		3,450,000		•	•	3,450,000	•					
Section 8												
Type in Description		-										
Type in Description		•	-									
Type in Description		-										
Type in Description		-										
Total		-		•	-	-	-					
Housing Voucher												
Type in Description		•										
Type in Description		-										
Type in Description		-										
Type in Description		-										
Total		-		•	•	•	-					
Other Programs												
Type in Description		-										
Type in Description		•										
Type in Description		-										
Type in Description												
Total		-		•		•	•					
TOTAL	\$	3,450,000	\$	- \$	- \$ -	\$ 3,450,000	\$.					
Total 5 Year Plan per CB-4	\$	3,450,000										

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

Balance check

If amount is other than zero, verify that projects listed above match projects listed on CB-4.